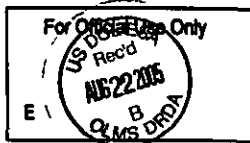


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P L 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U <u>23483</u>	2 Fiscal Year Covered From <u>1</u> / <u>1</u> / <u>2004</u> Through <u>12</u> / <u>31</u> / <u>2004</u>
3 Name and address of person filing Name <u>Michael J Sullivan</u> P O Box Bldg Room No If any <u>6th Floor</u> Street <u>1750 New York Ave, NW</u> City <u>Washington, DC</u> State <u></u> ZIP Code + 4 <u>20006 5386</u>	4 Name file number and address of labor organization Name <u>Sheet Metal Workers Int'l Assoc</u> Labor Organization File Number <u>000-073</u> P O Box, Building and Room Number If any <u>6th Floor</u> Street <u>1750 New York Avenue, NW</u> City <u>Washington, DC</u> State <u></u> ZIP Code + 4 <u>20006 5386</u>
5 Position in labor organization <u>General President</u>	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6 Name and address of Employer (Including trade name if any) Name <u></u> Trade Name If any <u></u> P O Box Bldg Room No If any <u></u> Street <u></u> City <u></u> State <u></u> ZIP Code + 4 <u></u>	7.a Nature of Interest, Transaction or Income <u></u> 7.b Amount. <u></u>
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### Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct, and complete (See the section on penalties in the instructions)

Signed

Michael J. Sullivan

On

8/5/05  
Date

202-662-0842  
Telephone Number

Name of Person Filing Michael J Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8 Name and address of Business (including trade name if any)

Name Trade Name if any P O Box, Bldg Room No if any Street City State  ZIP Code + 4 

## 9 Business deals with

☐ a. Labor Organization☐ b. Trust☐ c. Employer

## 10 If 9 b or 9 c. is checked give trust or employer's name

Name Trade Name if any P O Box, Bldg Room No if any Street City State  ZIP Code + 4 

## 11 a. Nature of such dealing

11.b Approximate dollar value of such dealing 

## 12 a. Nature of interest held or income received

12.b Amount 

## C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name GESD Capital Partners, LLCTrade Name if any P O Box, Bldg Room No if any Suite 1450Street 221 Main StreetCity San FranciscoState CA ZIP Code + 4 94105

## 14.a. Nature of payment.

Holiday Food Gift Basket13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14.b Amount of payment.

147.15

Name of Person Filing Michael J Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Trade Name if any P O Box, Bldg Room No if any Street City State  ZIP Code + 4 

## 9 Business deals with

☐ a. Labor Organization☐ b. Trust☐ c. Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name Trade Name if any P O Box Bldg Room No if any Street City State  ZIP Code + 4 

## 11 a. Nature of such dealing

11 b Approximate dollar value of such dealing 

## 12 a. Nature of interest held or income received

12 b Amount. 

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Daley + George, LtdTrade Name if any P O Box, Bldg Room No if any Suite 400Street 20 So Clark StreetCity ChicagoState IL ZIP Code + 4 60603

## 14 a. Nature of payment.

Dinner Cruise  
Including spouse

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment.

354.00

Name of Person Filing Michael J Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Trade Name if any P O Box, Bldg Room No if any Street City State  ZIP Code + 4 

## 9 Business deals with.

☐ a Labor Organization☐ b Trust☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name Trade Name if any P O Box, Bldg Room No if any Street City State  ZIP Code + 4 

## 11 a. Nature of such dealing

11 b Approximate dollar value of such dealing 

## 12 a Nature of interest held or income received

12.b Amount 

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Voyageur Asset ManagementTrade Name if any P O Box, Bldg Room No if any Suite 800Street 2300 M Street, NWCity Washington, DCState  ZIP Code + 4 20037

## 14.a Nature of payment.

Lunch13 b Is the Business an Employer ☐ No or Consultant ☐ ?

14.b Amount of payment.

65 00

Name of Person Filing Michael J Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Trade Name if any P O Box, Bldg., Room No if any Street City State  ZIP Code + 4 

## 9 Business deals with

☐ a. Labor Organization☐ b. Trust☐ c. Employer

## 10 If 9 b or 9 c. is checked give trust or employer's name

Name Trade Name if any P O Box, Bldg. Room No if any Street City State  ZIP Code + 4 

## 11 a Nature of such dealing

11 b Approximate dollar value of such dealing 

## 12 a Nature of interest held or income received

12.b Amount 

## C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Miserow FinancialTrade Name if any P O Box, Bldg. Room No if any Street 350 N Clark StreetCity ChicagoState IL ZIP Code + 4 60610

## 14.a. Nature of payment.

Dinner Cruise  
Brass Telescope - (1) gift  
Including Spouse

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.

431.00

Name of Person Filing

Michael J Sullivan

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Palm Springs Rivier Resort

Trade Name if any

P O Box, Bldg Room No if any

Street 1600 North Indian Canyon DrCity Palm SpringsState CAZIP Code + 4 92262-4602

## 9 Business deals with



a Labor Organization



b Trust



c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State

ZIP Code + 4

## 11 a Nature of such dealing

Held meeting at the hotel

## 11 b Approximate dollar value of such dealing

19,076.00

## 12 a Nature of interest held or income received

Complimentary Bar (7 days)  
Christmas Ham (1)  
Golf (1)  
Beverages (1)

## 12 b Amount

\$ 562.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State

ZIP Code + 4

## 14 a Nature of payment.

13 b Is the Business an Employer ☐or Consultant ☐ ?

## 14 b Amount of payment.

Name of Person Filing Michael J Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Stabilization Agreement for the Sheet Metal IndustryTrade Name if any SASMI

P O Box, Bldg Room No if any

Street 601 N. Fairfax StreetCity AlexandriaState VAZIP Code + 4 22314

## 9 Business deals with

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10 If 9 b or 9 c. is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

## 11 a Nature of such dealing

Provides supplemental unemployment benefits, health + welfare payments, severance benefits + travel benefits  
A Taft-Hartley Trust Fund

## 11 b Approximate dollar value of such dealing

0

## 12 a Nature of interest held or income received

meals (12)

## 12 b Amount.

\$ 813.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

## 14.a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.

Name of Person Filing Michael J. Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Opus Investment Advisors

Trade Name if any

P O Box, Bldg Room No if any Suite 3220Street 2321 Rosecrans AvenueCity El SegundoState CA ZIP Code + 4 90245

## 9 Business deals with.

- ☒ a. Labor Organization  
☐ b. Trust  
☐ c. Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

## 11 a Nature of such dealing

Investment Advisor to  
one of our insurance carriers

## 11 b Approximate dollar value of such dealing

0

## 12 a Nature of interest held or income received

Bottle of wine

## 12.b Amount

122 00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

## 14.a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14.b Amount of payment.



Name of Person Filing Michael J. Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Nat'l Coordinating Comm for Multiemployer PlansTrade Name if any NCCMP

P O Box, Bldg Room No if any

Street 815 16th Street, NWCity Washington DC

State ZIP Code + 4

## 9 Business deals with

☒ a. Labor Organization☒ b. Trust☐ c. Employer

## 10 If 9 b or 9 c. is checked give trust or employer's name

Name Sheet Metal Workers Nat'l Pension FundTrade Name if any SMW NPF

P O Box, Bldg Room No if any

Street 601 N Fairfax StreetCity AlexandriaState VA ZIP Code + 4 22314

## 11 a. Nature of such dealing

An organization of multiemployer pension + health + welfare plans, unions, employer associations, representing the interest of multiemployer plan participants before Congress

## 11 b Approximate dollar value of such dealing

\$25,000

## 12 a Nature of interest held or income received

Lodging (3)  
Dinner (1)  
Gift (1)

## 12 b Amount.

1,171.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

## 14 a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.

Name of Person Filing Michael J. Sullivan

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name International Training InstituteTrade Name if any ITIP O Box, Bldg Room No if any Suite 240Street 601 W. Fairfax StreetCity AlexandriaState VA ZIP Code + 4 22314

## 9 Business deals with

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10 If 9 b or 9 c. is checked give trust or employer's name

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

## 11 a Nature of such dealing

Apprentice Training  
Trust Fund

## 11.b Approximate dollar value of such dealing

N/A

## 12 a Nature of interest held or income received

Meals (23)  
Airfare (1)  
Lodging (12)

## 12.b Amount

4340.44

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

## 14.a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14.b Amount of payment.

Name of Person Filing Michael J. Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Mosaic

Trade Name if any

P O Box, Bldg Room No if any

Street 4801 Viewpoint PlaceCity CheverlyState MD ZIP Code + 4 20781

## 9 Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10 If 9 b or 9 c. is checked give trust or employer's name

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

## 11 a Nature of such dealing

Printer

## 11 b Approximate dollar value of such dealing

834,227

## 12 a Nature of interest held or income received

Dinner

## 12.b Amount.

\$ 68.00

## C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

## 14.a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.

Name of Person Filing Michael J. Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Sheet Metal Contrs National AssocTrade Name if any SMACNA

P O Box, Bldg Room No if any

Street 4201 Lafayette Center DriveCity ChantillyState VA ZIP Code + 4 20151-1209

## 9 Business deals with.

- ☒ a. Labor Organization  
☐ b. Trust  
☐ c. Employer

## 10 If 9 b or 9 c. is checked give trust or employer's name

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

## 11 a. Nature of such dealing

National Contractors  
Association + J+  
Arbitration Partner

11 b Approximate dollar value of such dealing N/A

## 12 a Nature of interest held or income received

Contractors National  
Association Annual Convention  
Dinner - including spouse

## 12.b Amount.

\$ 550.00

C Received from any employer (other than an employer covered under parts A and B above)  
or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant  
(including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

## 14.a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14.b Amount of payment.

Name of Person Filing Michael T. Sullivan

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Bank of New York

Trade Name if any

P O Box, Bldg Room No if any 12th FloorStreet One Wall StreetCity New YorkState NY ZIP Code + 4 10286

## 9 Business deals with

- ☐ a Labor Organization  
☒ b Trust  
☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name National Pension Fund

Trade Name if any

P O Box, Bldg Room No if any

Street 601 N. Fairfax StreetCity Alexandria,State VA ZIP Code + 4 22314

## 11 a Nature of such dealing

Custodian for investments

## 11 b Approximate dollar value of such dealing

236,312

## 12 a Nature of interest held or income received

Dinner including spouse

## 12 b Amount

\$218.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State

ZIP Code + 4

## 14 a Nature of payment.

13 b Is the Business an Employer ☐or Consultant ☐

?

## 14 b Amount of payment

Name of Person Filing Michael J. Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (Including trade name if any)

Name The Segal CompanyTrade Name if any P O Box, Bldg Room No if any Suite 500Street 101 N Wacker DriveCity ChicagoState IL ZIP Code + 4 60606

## 9 Business deals with

- ☐ a Labor Organization  
☒ b Trust  
☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name SMW National Pension FundTrade Name if any P O Box Bldg Room No if any Street 601 N. Fairfax StreetCity AlexandriaState VA ZIP Code + 4 22314

## 11 a Nature of such dealing

Actuarial

## 11 b Approximate dollar value of such dealing

242,489

## 12 a Nature of interest held or income received

Dinner including spouse

## 12 b Amount.

\$206.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (Including trade name if any)

Name Trade Name if any P O Box Bldg Room No if any Street City State  ZIP Code + 4 

## 14 a Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.

Name of Person Filing

Michael J Sullivan

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Turner Investment PartnersTrade Name if any: P O Box, Bldg Room No if any Suite 100Street 1205 Westlake DriveCity BerwynState PA ZIP Code + 4 19312

## 9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name SMW National Pension FundTrade Name if any: P O Box Bldg Room No if any Street 601 N Fairfax StreetCity AlexandriaState VA ZIP Code + 4 22314

## 11 a Nature of such dealing

Custodian for Investment

## 11 b Approximate dollar value of such dealing

417,398

## 12 a Nature of interest held or income received

Dinner including spouse

## 12 b Amount.

\$ 88.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Trade Name if any: P O Box, Bldg Room No if any Street City State  ZIP Code + 4 

## 14 a Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.

Name of Person Filing Michael J Sullivan

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Amalgamated Bank

Trade Name if any

P O Box, Bldg Room No if any

Street One West MonroeCity ChicagoState ILZIP Code + 4 60603

## 9 Business deals with

- ☒ a Labor Organization  
☐ b Trust  
☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State

ZIP Code + 4

## 11 a Nature of such dealing

Bank that offers  
credit card to  
our members

## 11 b Approximate dollar value of such dealing

0

## 12 a Nature of interest held or income received

Dinner

## 12 b Amount

43.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State

ZIP Code + 4

## 14 a Nature of payment

13 b Is the Business an Employer ☐or Consultant ☐

?

## 14 b Amount of payment.



Name of Person Filing Michael J. Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Wells Capital MgtTrade Name if any P O Box Bldg Room No If any Suite 210Street 450 E 96th StreetCity IndianapolisState IN ZIP Code + 4 46240

## 9 Business deals with

☐ a. Labor Organization☒ b. Trust☐ c. Employer

## 10 If 9 b or 9 c. is checked give trust or employer's name

Name SMW Local Unions + CouncilTrade Name if any P O Box Bldg Room No If any Street 601 N Fairfax StreetCity AlexandriaState VA ZIP Code + 4 22314

## 11 a. Nature of such dealing

Investment Manager

## 11 b Approximate dollar value of such dealing

27,604

## 12 a Nature of interest held or income received

Dinner

## 12 b Amount

120.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Trade Name if any P O Box Bldg Room No If any Street City State  ZIP Code + 4 

## 14 a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.

Name of Person Filing Michael J Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Cambiar Investments

Trade Name if any

P O Box, Bldg Room No if any #400Street 2401 E Second AveCity DenverState CO ZIP Code + 4 80206

## 9 Business deals with

☐ a. Labor Organization☒ b. Trust☐ c. Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name SMW Local Unions + Councils

Trade Name if any

P O Box Bldg Room No if any

Street 601 N Fairfax StCity AlexandriaState VA ZIP Code + 4 22314

## 11 a Nature of such dealing

Investment Manager

## 11 b Approximate dollar value of such dealing

72,181

## 12 a Nature of interest held or income received

Dinner

## 12 b Amount

72.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

## 14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.

Name of Person Filing Michael J Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Weiss, Peck + Greer

Trade Name if any

P O Box, Bldg Room No if any 31st FlStreet One New York PlazaCity New YorkState NY ZIP Code + 4 10004

## 9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name SMW Local Unions + Council

Trade Name if any

P O Box Bldg Room No if any

Street 601 N. Fairfax StCity Alexandria,State VA ZIP Code + 4 22314

## 11 a Nature of such dealing

Investment Manager

## 11 b Approximate dollar value of such dealing

15,248

## 12 a Nature of interest held or income received

Dinner- including spouse

## 12 b Amount.

350.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State

ZIP Code + 4

## 14 a Nature of payment.

13 b Is the Business an Employer ☐or Consultant ☐

?

## 14 b Amount of payment.

Name of Person Filing Michael J Sullivan

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Smith Barney

Trade Name if any

P O Box, Bldg Room No if any

Street 800 E 96th StCity IndianapolisState IN ZIP Code + 4 46240

## 9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name SASME

Trade Name if any

P O Box Bldg Room No if any

Street 601 N Fairfax StCity Alexandria, VAState VA ZIP Code + 4 22314

## 11 a Nature of such dealing

Investment Manager

## 11 b Approximate dollar value of such dealing

2,100

## 12 a Nature of interest held or income received

Golf

## 12 b Amount

254.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

## 14 a Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.

Name of Person Filing **Michael J Sullivan**

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name **Loomis Sayles**

Trade Name if any

P O Box, Bldg Room No if any

Street **2001 Pennsylvania Ave, NW**City **Washington, DC**State ZIP Code + 4 **20006**

## 9 Business deals with

- ☐ a Labor Organization  
☒ b Trust  
☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name **SASMI**

Trade Name if any

P O Box Bldg Room No if any

Street **601 N. Fairfax St**City **Alexandria**State **VA** ZIP Code + 4 **22314**

## 11 a Nature of such dealing

**Investment Manager**

## 11 b Approximate dollar value of such dealing

**191,664**

## 12 a Nature of interest held or income received

**Golf**

## 12 b Amount

**212.00**

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State

ZIP Code + 4

## 14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.

Name of Person Filing Michael J Sullivan

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Weiss, Peck + GreerTrade Name if any Robico USAP O Box, Bldg Room No if any 31st FlStreet 909 3rd AvenueCity New YorkState NY ZIP Code + 4 10022

## 9 Business deals with

- ☐ a Labor Organization  
☒ b Trust  
☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name SASMI

Trade Name if any

P O Box Bldg Room No if any

Street 601 N Fairfax StCity AlexandriaState VA ZIP Code + 4 22314

## 11 a Nature of such dealing

Investment Manager

## 11 b Approximate dollar value of such dealing

307,824

## 12 a Nature of interest held or income received

Golf

## 12 b Amount.

222 00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State

ZIP Code + 4

## 14 a Nature of payment.

13 b Is the Business an Employer ☐or Consultant ☐

?

## 14 b Amount of payment.

Name of Person Filing Michael J Sullivan

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Haley + Associates

Trade Name if any

P O Box, Bldg Room No if any Suite 304Street 5000 Sunny Side AvenueCity BeltsvilleState MD ZIP Code + 4 20705

## 9 Business deals with

- ☒ a Labor Organization  
☐ b Trust  
☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

## 11 a Nature of such dealing

Accountant11 b Approximate dollar value of such dealing 28,215

## 12 a Nature of interest held or income received

Dinner - including spouse12 b Amount. 122.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

## 14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment.

Name of Person Filing Michael J Sullivan

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name The Kamber Group

Trade Name if any

P O Box, Bldg Room No if any Suite 800Street 1301 K Street, NWCity Washington, DCState ZIP Code + 4 20005

## 9 Business deals with

- ☒ a Labor Organization  
☐ b Trust  
☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

## 11 a Nature of such dealing

Public Relations

## 11 b Approximate dollar value of such dealing

417,404

## 12 a Nature of interest held or income received

Lunch

## 12 b Amount.

42,50

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

## 14 a Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.



Name of Person Filing Michael J Sullivan

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name The McLaughlin Company

Trade Name if any

P O Box Bldg Room No if any

Street 1725 DeSales Street, NWCity Washington, DCState ZIP Code + 4 20036

## 9 Business deals with

- ☒ a Labor Organization  
☐ b Trust  
☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

## 11 a Nature of such dealing

Insurance Agents

## 11 b Approximate dollar value of such dealing

717 00

## 12 a Nature of interest held or income received

Poinsettia

## 12 b Amount.

58 00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

## 14 a Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.

Name of Person Filing Michael J Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Calibre CPA GroupTrade Name if any P O Box, Bldg Room No if any Suite 1050Street 1850 K Street, NWCity Washington, DCState  ZIP Code + 4 20006

## 9 Business deals with

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name Trade Name if any P O Box Bldg Room No if any Street City State  ZIP Code + 4 

## 11 a Nature of such dealing

Accountant

## 11.b Approximate dollar value of such dealing

88,390

## 12 a Nature of interest held or income received

Lunch (2)

## 12 b Amount

76.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Trade Name if any P O Box, Bldg Room No if any Street City State  ZIP Code + 4 

## 14.a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment

Name of Person Filing Michael J Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name National Energy Mgt InstituteTrade Name if any NEMIP O Box, Bldg Room No if any Suite 250Street 601 N. Fairfax StreetCity AlexandriaState VA ZIP Code + 4 22314

## 9 Business deals with

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10 If 9 b or 9 c. is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

## 11 a Nature of such dealing

Research + Development

## 11 b Approximate dollar value of such dealing

N/A

## 12 a Nature of interest held or income received

Lodging (12)  
Meals (27)

## 12 b Amount.

187970

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

## 14.a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14.b Amount of payment.

Name of Person Filing

Michael J Sullivan

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name National Energy Mgt Institute CommitteeTrade Name if any NEMICP O Box, Bldg Room No if any Suite 250Street 601 N Fairfax StreetCity AlexandriaState VAZIP Code + 4 22314

## 9 Business deals with

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10 If 9 b or 9 c. is checked give trust or employer's name

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State

ZIP Code + 4

## 11 a Nature of such dealing

Energy Management Trust Fund

## 11 b Approximate dollar value of such dealing

N/A

## 12 a Nature of interest held or income received

Lodging (12)  
Meals (26)

## 12.b Amount.

1762.45

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State

ZIP Code + 4

## 14.a Nature of payment.

13 b Is the Business an Employer ☐or Consultant ☐

?

## 14.b Amount of payment.

Name of Person Filing

Michael J Sullivan

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Sheet Metal Occupational Health Trust

Trade Name if any SMOHIT

P O Box, Bldg Room No if any

Street 601 N Fairfax Street, Suite 240

City Alexandria

State VA

ZIP Code + 4 22314

## 9 Business deals with

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10 If 9 b or 9 c. is checked give trust or employer's name

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State

ZIP Code + 4

## 11 a Nature of such dealing

Occupational Health Trust Fund

## 11 b Approximate dollar value of such dealing

N/A

## 12 a Nature of interest held or income received

Lodging (12)  
Meals (26)

## 12 b Amount

3524.91

## C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State

ZIP Code + 4

## 14.a. Nature of payment.

13 b Is the Business an Employer ☐or Consultant ☐

?

## 14.b Amount of payment.

# SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION

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1750 NEW YORK AVE NW  
WASHINGTON, DC 20006



PHONE (202) 783 5880  
FAX (202) 662 0894



MICHAEL J SULLIVAN  
GENERAL PRESIDENT

August 11, 2005

U S Department of Labor  
Employment Standards Administration  
Office of Labor-Management Standards  
200 Constitution Ave NW Room N-5616  
Washington DC 20210

Dear Ladies and Gentlemen

Attached please find my completed and executed LM-30 report for 2004. The information contained in the LM-30 report is based on my best effort to make a good-faith reconstruction of events occurring in 2004. If I subsequently recall any additional reportable details, I will prepare and file an amended LM-30 report.

Sincerely

A handwritten signature in cursive script that reads "Michael J. Sullivan".

MICHAEL J SULLIVAN  
General President

MJS/lam

Attachments